



## OVERNIGHT TRIP PERMISSION FORM

This form should be completed by a parent/guardian before your child can participate in an over night trip away from home. **(INSERT DETAILS OF TRIP, DATE, TIME LOCATION ETC)**  
One form should be completed for each child/young person.

Name

DOB / /

Address

Home Number

Mobile Number

School

### Medical Details

Name of Doctor

Doctor's Address

Doctor's Telephone No

Child's Medical Number

**Any specific medical conditions requiring medical treatment and/or medication**

Yes      If Yes, please supply details below

No

**Any allergies?**

Yes      If Yes, please supply details below

No

**Any contact with contagious or infectious diseases within the last four weeks?**

Yes      If Yes, please supply details below

No

**Please provide any special dietary requirements and the type of pain medication that may be given, if this should be required.**

Parental Consent (to be signed for persons under 18 years)

I ..... Being the parent/guardian of the above named child hereby give permission for the Team Manager to give the immediate necessary authority on my behalf for any medical or surgical treatment recommended by competent medical authorities, where it would be contrary to my son/daughter's interest, in the doctor's medical opinion, for any delay to be incurred by seeking my personal consent.

Name

Signature

**NB Please note that a young person can give their own consent for medical treatment if they are over 16.**

**Information to be added to consent forms for away trips:**

I undertake to pay the required sums by the dates specified in the cover letter and accept that in respect of any withdrawal from the trip, for whatever reason, there can be no refund of the whole or part of the payments unless the circumstances are covered by insurance.

I confirm that I have received the details of the above activity and consent to my child taking part in the visits and activities indicated. I understand that the staff have a common law duty to act in the capacity of a reasonably prudent parent.

I am aware of the required standard of behaviour as described in the GAA code of behaviour (underage) and agree that my child should abide by this and the Official rules when applied to games whilst in the care of the Club and I understand that a serious or continued breach of these may result in my child being sent home early at my expense.

Overnight Trip Permission Form v1.0